

Behested Payment Report

A Public Document

Behested Payment Report

1. Elected Officer or CPUC Member (Last name, First name)		Date Stamp	California Form 803 For Official Use Only 2013 APR -1 P 4: 37 DISTRICT ATTORNEY'S OFFICE SAN FRANCISCO, CALIFORNIA
Gascon, George			
Agency Name			
San Francisco District Attorney's Office			
Agency Street Address			
850 Bryant Street Rm 322			
Designated Contact Person (Name and title, if different)		<input type="checkbox"/> Amendment (See Part 5)	
Tara Anderson, Grants & Policy Manager		Date of Original Filing: _____	
Area Code/Phone Number	E-mail (Optional)	(month, day, year)	
(415) 553-1203	tara.anderson@sfgov.org		

2. Payor Information (For additional payors, include an attachment with the names and addresses.)

Open Society Foundations

Name			
Address	New York	NY	10019
	City	State	Zip Code

3. Payee Information (For additional payees, include an attachment with the names and addresses.)

National Council on Crime and Delinquency (NCCD)

Name			
Address	Oakland	CA	94612
	City	State	Zip Code

4. Payment Information (Complete all information.)

Date of Payment: March 28, 2013 (month, day, year) Amount of Payment: (In-Kind FMV) \$ 100,000 (Round to whole dollars.)

Payment Type: Monetary Donation or In-Kind Goods or Services (Provide description below.)

Brief Description of In-Kind Payment: _____

Purpose: (Check one and provide description below.) Legislative Governmental Charitable

Describe the legislative, governmental, charitable purpose, or event: Technical assistance for the San Francisco Sentencing Commission and Victim Services Division of the San Francisco District Attorney's Office.

5. Amendment Description or Comments

NCCD will provide technical support and conduct research and data analysis. This includes performing quantitative and qualitative research that builds on and supplements existing data reports and analyses conducted by the state, other jurisdictions, and/or organizations. NCCD will conduct an analysis of the provision of victim/witness services provided by the SFDA. This analysis will focus on the organization's position, performance, problems, and potential. This analysis will not only support and inform the work of San Francisco, but other counties too.

6. Verification

I certify, under penalty of perjury under the laws of the State of California, that to the best of my knowledge, the information contained herein is true and complete.

Executed on 3-29-2013 DATE By  SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER